## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |  |   |                   |              |   |                  |      | SMALL ENTITY TYPE   |                        | OR        | OTHER<br>SMALL      |                        |   |  |  |  |
|--|--|---|-------------------|--------------|---|------------------|------|---------------------|------------------------|-----------|---------------------|------------------------|---|--|--|--|
| TOTAL CLAIMS 88  |  |   |                   |              |   |                  |      | RATE                | FEE                    |           | RATE                | FEE                    |   |  |  |  |
| FOR  |  |   | NUMBER FILED      |              | NUMBER EXTRA  |                  |      | BASIC FEE           | 355.00                 | OR        | BASIC FEE           | 710.00                 |   |  |  |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 88 minus 20=      |              | . 68  |                  |      | X\$ 9=              |                        | OR        | X\$18=              | 1224-0                 |   |  |  |  |
| INDEPENDENT CLAIMS   |  |   | 15 min            | us 3 =       | . 12  |                  |      | X40=                |                        | OR        | X80=                | 960.0                  |   |  |  |  |
| MU   | LTIPLE DEPEN                                     | DENT CLAIM PI                             | RESENT            |              |   |                  |      | +135=               |                        | OR        | +270=               | 1007                   |   |  |  |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |                   |              |   |                  |      | TOTAL               |                        | OR        | TOTAL               | 28946                  | K |  |  |  |
| Claims as amended - Part II  |  |   |                   |              |   |                  |      |                     | <u></u>                | J • · · · | OTHER               |                        | ľ |  |  |  |
| (Column 1) (Column 2) (Column 2) (Column 2)                              |  |   |                   |              |   | (Column 3)       | )    | SMALLE              |                        | OR /      | SWALL               |                        |   |  |  |  |
| AMENDMENT A  | در در الأفاق                                     | REMAINING<br>AFTER<br>AMENDMENT           |                   | NUM<br>PREVI | . —   | PRESENT<br>EXTRA |      | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |   |  |  |  |
|  | Total  | . 86                                      | Minus             | 8            | 8   | = /              |      | X\$ 9=              | 1                      | OR        | X\$18=              |                        |   |  |  |  |
|  | Independent                                      | • 9                                       | Minus             | ••• /        | 5   | = /              |      | X40=                | /                      | OR        | X80=                |                        |   |  |  |  |
|  | FIRST PRESE                                      | NTATION OF M                              | ULTIPLE DEP       | ENDEN        | TCLAIM  |                  |      | +135=               | (                      | OR        | +270=               | 7                      |   |  |  |  |
|  |  |   |                   |              |   |                  |      | TOTAL<br>ADDIT, FEE |                        |           | TOTAL<br>ADDIT, FEE |                        |   |  |  |  |
| (Column 1) (Column 2) (Column 3)   |  |   |                   |              |   |                  |      | ADDIT. FEE          | <u> </u>               | י ע       | ADDIT. FEE          | <del></del>            | ĺ |  |  |  |
| AMENDMENT B  | 14.  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | NUM<br>PREV  | HEST<br>MBER<br>IOUSLY<br>D FOR   | PRESENT<br>EXTRA |      | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |   |  |  |  |
|  | Total  | •   | Minus ·           | **           |   | e ·              |      | X\$ 9=              |                        | OR        | X\$18=              |                        |   |  |  |  |
|  | Independent                                      | •   | Minus             | ***          |   | =                |      | X40=                |                        | OR        | X80=                |                        |   |  |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                   |              |   |                  |      | +135=               |                        | OR        | +270=               |                        |   |  |  |  |
|  |  |   |                   |              |   |                  |      | TOTAL<br>ADDIT, FEE |                        | OR        | TOTAL<br>ADDIT. FEE |                        | 1 |  |  |  |
|  |  | 3)_                                       |                   |              |   |                  |      |                     |                        |           |                     |                        |   |  |  |  |
| AMENDMENT C  |  | CLAIMS REMAINING AFTER AMENDMENT          |                   | NUI<br>PREV  | HEST<br>MBER<br>NOUSLY<br>D FOR   | PRESENT<br>EXTRA |      | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE | ] |  |  |  |
| SD SE  | Total  | •   | Minus             | **           | _   | =                |      | X\$ 9=              |                        | OR        | X\$18=              |                        |   |  |  |  |
| ANGER  | Independent                                      | ·   | Minus             | ***          |   | =                |      | X40=                |                        | OR        | X80=                |                        | 1 |  |  |  |
|  | PINST PRESENTATION OF WIDETIFEE DEFENDENT OCCUR. |   |                   |              |   |                  |      | .125                |                        | 1         | +270=               |                        | 1 |  |  |  |
|  | If the entry in colu                             | ımn 1 is less than                        | the entry in colu | ımn 2, wr    | ite "0" in o  | olumn 3.         | .a.= | +135=               |                        | OR        | TOTAL               |                        | ╢ |  |  |  |
| **   | *If the "Highest No                              | Imber Previously                          | Paid For IN THI   | IS SPACE     | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                  |      |                     |                        |           |                     |                        |   |  |  |  |